PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/552,290			ing Date 03/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
_	FOR	I N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	- OK	RATE (\$)	FEE (\$)	
	BASIC FEE	-	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (8)	
┢	(37 CFR 1.16(a), (b), s SEARCH FEF	or (c))	N/A						ł			
H	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		l	N/A		
TO	(37 CFR 1.16(o), (p), (N/A		N/A		N/A		١	N/A		
(37	CFR 1.16(i)) EPENDENT CLAIM	e	minus 20 =		•		x \$ =		OR	x \$ =		
(37	CFR 1.16(h))		minus 3 = * If the specification and draw			l	x \$ =		ı	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	gs exceed 100 on size fee due for each n thereof. See CFR 1.16(s).								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	11/19/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(1))	• 20	Minus	·· 24	= 0	1	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 8	Minus	•••6	= 2	1	x \$ =		OR	X \$220=	440	
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	440	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus			1	x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))		Minus	***]	x \$ =		OR	x \$ =		
딦	Application Size Fee (37 CFR 1.16(s))					l			1			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write '70' in column 3. "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For' (Total or independent) is the highest number found in the appropriate box in column 1.												

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